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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

2

Application Number

10/712,390

Filing Date

November 12, 2003

First Named Inventor

Bong, William L.

Art Unit

1725

Examiner Name

Tran, Len

Attorney Docket Number

ARC 03.01

ENCLOSURES (Check all that apply)

Fee Transmittal Form



Fee Attached



Amendment/Reply



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Certified Copy of Priority Document(s)

Reply to Missing Parts/
Incomplete ApplicationReply to Missing Parts
under 37 CFR 1.52 or 1.53

Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a
Provisional Application

Power of Attorney, Revocation



Change of Correspondence Address



Terminal Disclaimer



Request for Refund



CD, Number of CD(s) _____



Landscape Table on CD



After Allowance Communication to TC

Appeal Communication to Board
of Appeals and InterferencesAppeal Communication to TC
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Other Enclosure(s) (please identify
below):

Change of Correspondence Address

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Virtual Legal, P.C.

Signature



Printed name

Michael A. Kerr

Date

March 2, 2007

Reg. No.

42,722

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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Marie Martin-Kerr

Date

March 5, 2007

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**CHANGE OF
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Patent Number	7038159
Issue Date	May 2, 2006
Application Number	10/712,390
Filing Date	November 12, 2003
First Named Inventor	Bong, William L.
Attorney Docket Number	ARC 03.01

Please change the Correspondence Address for the above-identified patent to:

☐ The address associated with Customer Number:**OR**☒ **Firm or Individual Name** Arcmatic Integrated Systems, Inc.

1971 Broadway Street

Address**City** Vallejo**State** CA**ZIP** 94589**Country** USA**Telephone** 775-841-3388**Email**

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☐ Patentee.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).☒ Attorney or agent of record. Registration Number 42,722**Signature****Typed or Printed Name** Michael A. Kerr**Date** March 2, 2007**Telephone** 775-841-3388

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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